PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

applicant(s):

Roby et al.

Examiner: Gehman, Bryon P.

Serial No.:

10/620,134

Group: Art Unit 3728

Filed:

July 15, 2003

Docket: 2853 (203-3410)

For:

SUTURE PLEDGET PACKAGE

Dated: April 19, 2006

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a [] verified statement previously submitted.
- A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- No additional fee is required. [X]

The fee has been calculated as shown below:

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	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2)	(Col. 3)	SMALL ENTITY			SMALI	_ ENTITY
			HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT.	OR	RATE	ADDIT. FEE
TOTAL	3*	MINUS	20**	= 0	X 25	\$	X	50	\$ 0
INDEP.	1*	MINUS	3**	= 0	X 100	\$	X	200	\$ 0
\Box FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						\$	X	360	\$ 0
					TOTAL		OR 1	OTAL	\$ 0

ADDIT. FEE

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 19, 2006.

Dated: April 19, 2006

Thomas M. Rosselli

^{*} If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

^{**} If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- [] Please charge Deposit Account No. <u>50-2140</u> in the amount of \$___. Two (2) copies of this sheet are enclosed.
- [] A check in the amount of \$____ is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

Thomas M. Rosselli Reg. No. 53,532

Attorney for Applicant(s)

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TMR/dag



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Application No.:

10/620,134

Applicant(s):

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Art Unit:

3728

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Gehman, Bryon P.

Docket No.:

2853 (Attorney Docket No. 203-3410)

Title:

SUTURE PLEDGET PACKAGE

Date:

April 19, 2006

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated January 19, 2006, kindly amend the aboveidentified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 3 of this paper.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

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Dated: April 19, 2006

Thomas M. Rosselli